## IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD 510 EAST 12<sup>TH</sup>, SUITE 1A DES MOINES, IA 50319

Fax: (515)281-4073 www.iowa.gov/ethics

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Iowa Code section 8.7 requires all gifts and bequests given to any department of the state of Iowa or received by the Governor on behalf of the state be reported to the Iowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is to be filed within 20 days of receipt of the gift or bequest.

## FORM-GB

Gift or Bequest information received by a department or accepted by the Governor on behalf of the state

For office use only

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DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BE	QUEST:	()
Clarinda Correctional Facility		Selection of the select
Name of Department or Office 2000 N. 16th Street	Clarinda, IA 51632	man s
Mailing Address 712-542-5634	City, State, Zip Code	<b>1</b>
Area Code & Telephone No.		
ONTACT PERSON FOR RECIPIENT DEPARTMENT OR	OFFICE:	
Meredith Baker		
Name		
Mailing Address (if different from above)	City, State, Zip (if different from abo	ove)
ineredith.baken@iowa.gov	712-542-6107	
Email Address	Area Code & Telephone Number (il	different from above)
Anthony Bertolone Name  Mailing Address City, State, Zip Code  Area Code & Telephone Number  Email Address (optional)	07/03/17  Date of Gift or Bequest  'value is defined as "fair market value receiving department or office. If no	
Provide a description of the gift or bequest and purpose thereof: "Lego Batman" DVD for the CCF movie library.		
Criteria to use this form:		
Receipt of any gift or bequest that is received by any department of	of the state or received by the Governor on behalf o	of the state.
tatement of Affirmation:		

Randy Gibbs	affirm that the gift or bequest reported above is accurate. I further affirm that the information concerning the donor a	nr
assessment of the fair market	alue (if applicable) is correct and true to the best of my knowledge.	.,,,

	07/05/17	
Signature	Date	